

10-30-00

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PTO/SB/05 (08-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. P04254US1

First Inventor Melick, et al.

Title Method of Transmitting Data...

Express Mail Label No. EL688893488US

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

**ADDRESS TO:**Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
2. ☒ Applicant claims small entity status.  
See 37 CFR 1.27.
3. ☒ Specification [Total Pages ☒ 8 ]  
(preferred arrangement set forth below)
- Descriptive title of the invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets ☐ ]
5. ☐ Oath or Declaration [Total Pages ☐ ]
- a. ☒ Newly executed (original or copy)
- b. ☐ Copy from a prior application (37 CFR 1.63 (d))  
(for continuation/divisional with Box 17 completed)
- i. ☐ **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s)  
named in the prior application, see 37 CFR  
1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or  
Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all necessary)
- a. ☐ Computer Readable Form (CRF)
- b. Specification Sequence Listing on:
- i. ☐ CD-ROM or CD-R (2 copies); or
  - ii. ☐ paper
- c. ☐ Statements verifying identity of above copies

**ACCOMPANYING APPLICATION PARTS**

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement [Power of Attorney]  
(when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 [Copies of IDS Citations]
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
16. ☒ Other: Cert. of Express Mail

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)

of prior application No.: \_\_\_\_\_

Prior application information:

Examiner \_\_\_\_\_

Group / Art Unit: \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**18. CORRESPONDENCE ADDRESS**☒ Customer Number or Bar Code Label

22885

or ☐ Correspondence address below

(Insert Customer No. or Attach bar code label here)

Name	R. Scott Johnson				
Address	Zarley, McKee, Thomte, Voorhees & Sease				
	801 Grand Avenue - Suite 3200				
City	Des Moines	State	IA	Zip Code	50309-2721
Country	U.S.A.	Telephone	515-288-3667	Fax	515-288-1338

Name (Print/Type)

R. Scott Johnson

Registration No. (Attorney/Agent)

45,792

Signature

Date 10/27/00

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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**FEE TRANSMITTAL  
for FY 2001**

Patent fees are subject to annual revision.

**TOTAL AMOUNT OF PAYMENT** (\$)**355.00****Complete if Known**

Application Number	
Filing Date	10/27/2000
First Named Inventor	Melick, et al.
Examiner Name	
Group Art Unit	
Attorney Docket No.	P04254US1

**METHOD OF PAYMENT**

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:
- Deposit Account Number **26-0084**
- Deposit Account Name **Zarley, McKee, Thomte, Voorhees & Sease**
- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
- ☐ Applicant claims small entity status. See 37 CFR 1.27
2. ☒ **Payment Enclosed:**
- ☒ Check ☐ Credit card ☐ Money Order ☐ Other

**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
<input checked="" type="checkbox"/>	<input type="checkbox"/>	01	710	201 355 Utility filing fee	355
<input checked="" type="checkbox"/>	<input type="checkbox"/>	06	320	206 160 Design filing fee	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	107	490	207 245 Plant filing fee	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	08	710	208 355 Reissue filing fee	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	14	150	214 75 Provisional filing fee	
<b>SUBTOTAL (1)</b>					<b>(\$)<b>355</b></b>

**2. EXTRA CLAIM FEES**

Total Claims **20** - 20\*\* = **0** x **Fee from below** = **Fee Paid**

Independent Claims **3** - 3\*\* = **0** x **Fee from below** = **Fee Paid**

Multiple Dependent **0** x **Fee from below** = **Fee Paid**

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description
<input type="checkbox"/>	<input type="checkbox"/>	103	18	203 9 Claims in excess of 20
<input type="checkbox"/>	<input type="checkbox"/>	102	80	202 40 Independent claims in excess of 3
<input type="checkbox"/>	<input type="checkbox"/>	104	270	204 135 Multiple dependent claim, if not paid
<input type="checkbox"/>	<input type="checkbox"/>	109	80	209 40 ** Reissue independent claims over original patent
<input type="checkbox"/>	<input type="checkbox"/>	110	18	210 9 ** Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2)****(\$)**0****

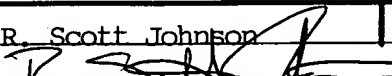
\*\*or number previously paid, if greater; For Reissues, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
<input type="checkbox"/>	<input type="checkbox"/>	105	130	205 65 Surcharge - late filing fee or oath	
<input type="checkbox"/>	<input type="checkbox"/>	127	50	227 25 Surcharge - late provisional filing fee or cover sheet	
<input type="checkbox"/>	<input type="checkbox"/>	139	130	139 130 Non-English specification	
<input type="checkbox"/>	<input type="checkbox"/>	147	2,520	147 2,520 For filing a request for <i>ex parte</i> reexamination	
<input type="checkbox"/>	<input type="checkbox"/>	112	920*	112 920* Requesting publication of SIR prior to Examiner action	
<input type="checkbox"/>	<input type="checkbox"/>	113	1,840*	113 1,840* Requesting publication of SIR after Examiner action	
<input type="checkbox"/>	<input type="checkbox"/>	115	110	215 55 Extension for reply within first month	
<input type="checkbox"/>	<input type="checkbox"/>	116	390	216 195 Extension for reply within second month	
<input type="checkbox"/>	<input type="checkbox"/>	117	890	217 445 Extension for reply within third month	
<input type="checkbox"/>	<input type="checkbox"/>	118	1,390	218 695 Extension for reply within fourth month	
<input type="checkbox"/>	<input type="checkbox"/>	128	1,890	228 945 Extension for reply within fifth month	
<input type="checkbox"/>	<input type="checkbox"/>	119	310	219 155 Notice of Appeal	
<input type="checkbox"/>	<input type="checkbox"/>	120	310	220 155 Filing a brief in support of an appeal	
<input type="checkbox"/>	<input type="checkbox"/>	121	270	221 135 Request for oral hearing	
<input type="checkbox"/>	<input type="checkbox"/>	138	1,510	138 1,510 Petition to institute a public use proceeding	
<input type="checkbox"/>	<input type="checkbox"/>	140	110	240 55 Petition to revive - unavoidable	
<input type="checkbox"/>	<input type="checkbox"/>	141	1,240	241 620 Petition to revive - unintentional	
<input type="checkbox"/>	<input type="checkbox"/>	142	1,240	242 620 Utility issue fee (or reissue)	
<input type="checkbox"/>	<input type="checkbox"/>	143	440	243 220 Design issue fee	
<input type="checkbox"/>	<input type="checkbox"/>	144	600	244 300 Plant issue fee	
<input type="checkbox"/>	<input type="checkbox"/>	122	130	122 130 Petitions to the Commissioner	
<input type="checkbox"/>	<input type="checkbox"/>	123	50	123 50 Petitions related to provisional applications	
<input type="checkbox"/>	<input type="checkbox"/>	126	240	126 240 Submission of Information Disclosure Stmt	
<input type="checkbox"/>	<input type="checkbox"/>	581	40	581 40 Recording each patent assignment per property (times number of properties)	
<input type="checkbox"/>	<input type="checkbox"/>	146	710	246 355 Filing a submission after final rejection (37 CFR § 1.129(a))	
<input type="checkbox"/>	<input type="checkbox"/>	149	710	249 355 For each additional invention to be examined (37 CFR § 1.129(b))	
<input type="checkbox"/>	<input type="checkbox"/>	179	710	279 355 Request for Continued Examination (RCE)	
<input type="checkbox"/>	<input type="checkbox"/>	169	900	169 900 Request for expedited examination of a design application	
Other fee (specify) _____					
<b>Reduced by Basic Filing Fee Paid</b>					<b>SUBTOTAL (3)</b>
					<b>(\$)</b>

**SUBMITTED BY**

Complete (if applicable)

Name (Print/Type)	<b>R. Scott Johnson</b>	Registration No. (Attorney/Agent)	<b>45,792</b>	Telephone	<b>515-288-3667</b>
Signature		Date	<b>10/27/00</b>		

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